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PROTECTING THE CULTURAL IDENTITY OF GYPSY, ROMA AND TRAVELLER CHILDREN LIVING IN THE PUBLIC CARE SYSTEM

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Abstract

Throughout Europe, the public care system exists to protect the welfare of over one million children who have suffered from abuse or neglect or experienced bereavement, disability or serious illness in one or both parents. However, although the public care system is primarily intended to offer children protection from risk and harm, there are some concerns to suggest that it is also being systematically misused to “eradicate Gypsy existence and culture”. Cited as a system for state sanctioned control, rather than as a system for effective and safe child care, it is believed that Gypsy, Roma and Traveller children across Europe are being taken away from their communities and placed in public care for no other reason than that they are Gypsies, Roma or Travellers. With regard to basic human rights, this is a serious allegation. There are, though, some conceptual tensions associated with this claim. Firstly, little is known about how many Gypsy, Roma and Traveller children are actually living in public care throughout Europe. Second, little is known about the carers who look after these children, and third, little is known about the lived experiences of Gypsies, Roma and Travellers themselves.

In an attempt to shed further light on this situation, the present paper summarises the findings of a higher degree research study that utilised interpretive phenomenological analysis to uncover the experiences of 10 Gypsies and Travellers who lived in the public care system in the United Kingdom or the Republic of Ireland. Based on the testimonies provided, this paper will problematise the allegation already presented to show that some Gypsy, Roma and Traveller children can experience a brief sense of relief when the opportunity to enter public care is presented to them. However, by drawing upon the experiences of those people who were sent to live in residential homes and other transcultural foster care placements, it will explain

why, without careful and competent multicultural planning, the existence and culture of Gypsy, Roma and Traveller children can be made vulnerable to the threats associated with acculturative distress and the experience of absolute social alienation in later life.

Keywords: Looked after children, foster care, social care, cultural identity, assimilation, acculturation, resilience, transcultural placements, stability, permanence, transitions, cultural competence

Background

Across Europe, the public care system provides a range of services for more than one million children (Petrie et al., 2006), with small group residential care used only when kinship or foster care is not immediately available or compatible with the child's needs or wishes (Thomas Coram Research Unit, 2004). In the majority of cases, children enter the public care system as a result of interfamilial stress or bereavement, disability or serious illness in one or both parents, physical abuse, sexual abuse, emotional abuse or neglect (Csáky, 2009). Whilst some EU Member States still offer services through institutionalised residential settings (Maluccio, 2006), more alternative family-based care services are being developed (Colton and Williams, 2006) to enable children to grow and develop in environments that are more suitable for their health and social care needs.

Though the primary purpose and function of various public care services aim to protect the welfare of vulnerable children, commentators on the historical oppression of Gypsy, Roma and Traveller communities, indicate that it is also being used for more dissonant reasons. In addition to providing a method to reduce the risks that might usually be concomitant with vulnerability. Some academics suggest that Gypsy, Roma and Traveller children are being systematically taken away from their families and placed in public care as a direct result of populist assimilative ideology (Cemlyn and Briskman, 2002). For these children, the public care system is reportedly used to “*eradicate Gypsy existence and culture*” (Liegeois, 1986; McVeigh, 1997; Fraser, 1995; Vanderbeck, 2005), rather than to protect the child from interfamilial distress or an experience of abuse or neglect per se (Okely 1997).

Before moving on to explore this allegation further, it is important to note that people who are frequently homogenised under the terms ‘Gypsy’, ‘Roma’ or ‘Traveller’ actually constitute a rich and diverse group of communities who each go under different names, and often distinguish themselves sharply from one another. Although a fuller exploration of these differences might be useful, any additional detail is beyond the scope of this paper. For readers new to this debate, the book ‘Romani culture and Gypsy identity’ (Acton and Mundy, 1997) is recommended as an accessible foundation from which to better understand the diversity that exists within a much broader context.

Despite the important differences that exist between these diverse groups of people, all seem to share common experiences, of racism, discrimination, poverty, social injustice (Lane, Spencer and Jones, 2014) including the systematic removal of children into public care (Okely, 1997). Evidence to support the latter allegation has been reported from Czechoslovakia (Guy, 1975); Italy (Mayall, 1995); Austria, France, and Germany (Liegeois, 1986); Norway and Switzerland (Kenrick, 1994); the Republic of Ireland (O’Higgins, 1993); England (Cemlyn and Briskman, 2002); Bulgaria, Czech Republic, Hungary, Romania, Slovakia (European Roma Rights Centre, (ERRC) 2011) Greece, Hungary, the Netherlands, Poland and Sweden (Brunnberg and Visser-Schuurman, 2015). However, substantiating these allegations with empirical data is problematic because, with the exception of government census data in a small number of these countries, minimal information is available to inform an understanding of the actual number of Gypsy, Roma and Traveller

children living in the public care system. The primary reason cited for this shortage of data is reflected, in part, in the various constitutional privileges which prohibit the disaggregation of ethnicity within a general population (Liga Lidskyh Prav, 2010; Waldron, 2012). Taking into consideration historical acts of persecution, ethnic categories are not usually monitored in Europe because of the way that this information has been used in the past to justify hate speech and various projects of ethnic cleansing and social control. Whilst the avoidance of ethnic compartmentalisation might be intended to reduce the opportunities for discrimination, such refrainment so means that the allegation that the public care system is being used to eradicate the existence and culture of Gypsy, Roma and Traveller children could be difficult to prove beyond reasonable doubt (Farkas, 2004).

Within England, however, the Office of National Statistics (ONS) does monitor data on ethnicity. In 2014 they reported that there were 210 'Gypsy/Roma' children and 70 'Travellers of Irish Heritage' children living in the public care system (ONS, 2014a). Although these numbers are relatively small, the data released by the ONS confirms significant disproportionality. The figures show, for instance, that the number of 'Travellers of Irish Heritage' has gone up by 250 per cent, and the number of 'Gypsy/Roma' children has gone up by 425 per cent since 2009. Compared to an increase of just 8 per cent for entire public care population, the numbers presented by the ONS suggest that Gypsy, Roma and Traveller children are more likely to be taken into public care than any other child living in England. This of course may not be the case, and until more rigorous statistical evidence is available to indicate the reasons why these children enter into the public care system, this concern may not be verified.

Elsewhere in Europe, data shows that in 2014, 186 'Traveller' children were living in public care in Northern Ireland. Against, whilst

an apparently small number, that survey confirms that 'Traveller' children represent the numerically largest ethnic minority group living in public care (ONS, 2014b). Further evidence is also available from independent field research carried out in Bulgaria, Greece, Czech Republic, Hungary, Italy, the Republic of Ireland, the Netherlands, Poland, Romania, Slovakia and Sweden (Brunnberg and Visser-Schuurman, 2015; ERRC, 2011) each showing that Gypsy, Roma and Traveller children are disproportionality over-represented in the public care system.

In brief summary, the available literature indicates that Gypsies, Roma and Travellers are being taken away from their families and communities at a disproportionate rate. However, the evidence which could be used to explain this disproportionality remains largely anecdotal. This includes the concerns already cited. In order to consider the claim presented at the outset in further detail, it is also important to try to understand where these children live once they enter the public care system. This must include any reported evidence to indicate that cultural continuity is being provided and that opportunities to maintain biological links to families and wider kinship networks are being achieved.

Looking after Gypsy, Roma and Traveller children

While the legal frameworks are slightly different in each EU Member State, they all allow for children to enter the public care system directly from home, and require government departments, or nominated organisations, to provide appropriate support for children according to their circumstances. This also includes the duty to ensure that the care being provided enables the child to experience cultural continuity (Barn, 2012). Although good work is being reported to empower Gypsies, Roma and Travellers to become foster carers in the Republic of Ireland through the Shared Rearing Service (O'Higgins (1993) and elsewhere

¹¹In England the Department for Education do not disaggregate the terms 'Gypsy' and 'Roma'. The fact that both groups main-

tain their own sense of identity and separateness from one another is not represented in this government policy.

(see Schmidt and Baily, 2014; National Federation of Gypsy Liaison Groups, 2014), this progress is slow and infrequent. For all the good intentions of the various child care directives, it is reported that the duty to establish and maintain cultural continuity rarely extends to include Gypsy, Roma and Traveller children (Brunnberg and Visser-Schuurman, 2015). For example, rather than being provided foster placements with suitable Gypsy, Roma and Traveller carers, these children are often sent to live in transcultural placements, with carers who are not Gypsies, Roma or Travellers. At worst, these children living in some EU Member States can also be 'sentenced to a life in institutionalised care' because there are no suitable Roma carers, and potential non-Roma carers refuse to care for Roma children (ERRC, 2011:66).

Whilst transcultural foster placements can lead to better outcomes for some (see Brown et al., 2010), research carried with Black and Asian children (Barn, 2010; 2012; Mylène and Ghayda, 2015) highlights how an experience of loneliness and isolation, including a sense of not belonging, can become a defining feature of a child's journey through the care system. As a direct result of cultural isolation, O'Higgins (1993: 178) has shown Irish Traveller children living in transcultural placements in the Republic of Ireland had experienced acculturative distress and difficult transitions into adulthood:

'Traveller children growing up in care develop the settled values. Their only contact with Travellers is with their own parents who are frequently angry and powerless at the dominant culture, which has taken their children. Under these circumstances, a positive experience of a Traveller family life is frequently lost to these children. When they attempt to establish an independent life, they have been prepared for the settled way of life and have little positive sense of themselves as Travellers, but find themselves ostracised by the settled community and treated as Travellers and outsiders. This 'limbo' existence easily leads to 'isolation, alienation

and a drift into a culture of alcohol, drugs, and offending'.

Reflecting on these findings in a later study, Pemberton (1999) points out that the 'limbo' existence being referred to by O'Higgins proves that Irish Traveller children are unable to manage the experience of living in, or leaving care easily. She reports, for instance, that of the fifty-six Irish Traveller children who left care in the Republic of Ireland between 1981 and 1988, less than ten appeared to have managed the transition from state care to independent living with any degree of success. 'Thirty-five', she reports *'had spent time in jail, for offences often involving serious alcohol abuse, violence to others and robbery'* (Ibid: 179).

Similar findings have been presented more recently by Kelleher et al., (2000) and the ERRC (2011). Brunnberg and Visser-Schuurman (2015) also show that various public care services in Bulgaria, Greece, Hungary, Ireland, the Netherlands, Poland, Sweden and the UK, are all failing to validate or demonstrate genuine positive regard for the specific cultural needs of Gypsy, Roma and Traveller children. These concerns are also comparable to the reported experience of Black, Asian and minority children who can also experience acculturative distress as they attempt to make sense of transcultural care settings (Mylène and Ghayda, 2015). Considered conjointly, all of this research suggests that unless cultural continuity is maintained, the risk of cultural assimilation, or worse, the risk of complete 'ethnic cleansing' (Hawes and Perez, 1996), may be unavoidable.

This brief discussion has indicated that institutionalised care and transcultural placements can cause acculturative distress for Gypsy, Roma and Traveller children as a direct result of cultural isolation. However, there still remain some basic conceptual problems with the concerns that the public care system is being systematically misused to 'eradicate Gypsy existence and culture'. Whilst discriminatory perceptions have been reported to justify the removal of

Gypsy, Roma and Traveller children from their kinship networks and communities (Vanderbeck, 2005), it is also clear that for the most part the experiences of people who have lived in care as children themselves has not been studied in equal depth.

The research

The following sections of this paper summarise the findings of a larger higher degree research study that was conducted between 2008 and 2012. It utilised interpretive phenomenological analysis (Smith et al., 2009) to uncover the lived experiences of Gypsies, Roma and Travellers who had resided in the public care system as children. In order to advance some understanding of the lived experiences of Gypsy, Roma and Traveller people, the author of the current paper established the basis for a systematic inquiry. Following ethical approval, the author wrote a letter to 433 local government authorities in the UK as part of a systematic purposeful sampling procedure. The letter requested permission to interview the Gypsy, Roma and Traveller children who might be living in the care system within their jurisdiction. In response to that initial letter, 3 authorities replied to say that there were no Gypsies, Roma or Travellers living in care in their area. No response was received by the other 430 agencies.

Although there may be a number of reasons to explain the strikingly low response rate, the author decided that the initial approach was ineffective, so implemented a snowball sample instead. This later decision enabled people to become involved in the

study via independent referral from various independent and Charity based Gypsy, Roma and Traveller organisations. Whilst this sampling method did not seek to include Gypsy, Roma and Traveller children for ethical reasons, it did include adults who had lived in care as children. As the snowball sample was widely focused, the study was not geographically based or limited to a prescribed location. Nor was it restricted to a specific Gypsy, Roma or Traveller group.

Between 2008 and 2011, the snowball sample identified 19 people who had lived in the public care system in the UK and the Republic of Ireland. However, after an initial discussion about the aim of the project with the author, 9 people explained that they did not want to participate in the research as it might make them remember parts of their life that they preferred to forget. Basic information on the 10 people who did take part in the study is presented in Table 1.

Interviews were conducted in English at a location of the interviewee's choice. To enable full participation, and in direct response to the requests of each person who took part, the study's data collection methods included semi-structured face-to-face and telephone interviews, blogs, reflective letters, poems, and song lyrics all informed and guided by the same research schedule. The research strategy applied the same methods and research questions in the UK and the Republic of Ireland.

Table 1 Information regarding the people who took part in the study

| Pseudonym name | Length of time in care | Age | Accommodation before care | Placement Type | Ethnicity | Geographical location of placement | Approximate dates of care experience |
|----------------|---|-------|---------------------------|-----------------------------------|-----------------|--|--------------------------------------|
| Mary | 17 years | 40-50 | Trailer Roadside | Residential Home | Irish Traveller | Republic of Ireland | 1970s – 1980s |
| Helen | 8 months | 30-40 | Trailer Campsite | Residential Home | English Gypsy | Scotland | 1980s |
| Ruth | 5 years | 20-30 | Trailer Roadside | Foster Care | Irish Traveller | England | 1990s |
| Josephine | Adopted as a baby | 30-40 | Trailer Campsite | Adoption | Showman | Hong Kong but moved back to England at the age of 18 | 1980s |
| Peter | 11 years | 18-20 | Trailer Campsite | Residential Home | Irish Traveller | England | 1990s - 2000s |
| Michael | 3 years, then adopted by Traveller carers | 20-30 | Trailer Roadside | Foster care | Irish Traveller | England in foster care then Adopted in Ireland | 1990s |
| Laura | 4 years | 30-40 | Trailer Campsite | Foster Care and Residential Home | Irish Traveller | England | 1980s |
| Lisa | 15 years | 20-30 | Trailer Campsite | Foster Care with Traveller carers | Irish Traveller | Republic of Ireland | 1990s - 2000s |
| Emma | 16 years | 18-20 | Trailer Campsite | Foster Care with Traveller carers | Irish Traveller | Republic of Ireland | 1990s - 2000s |
| Sarah | 13 Years | 18-20 | Trailer Campsite | Foster Care with Traveller carers | Irish Traveller | Republic of Ireland | 1990s - 2000s |

Findings

The testimonials provided by the 10 people who took part in the study revealed that Gypsy and Traveller children can often enter into care as a direct result of domestic abuse, substance misuse, neglect or concerns regarding parental capacity. Whilst seven people described social care intervention as representing a welcomed form of protection against these experiences, it is crucial to understand that the lack of sensitivity afforded to their cultural identity whilst in care, resulted in further rejection and cultural displacement. Reflecting on these experiences as adults, each person who was sent to live in a transcultural placement explained that although their pre-foster care experiences

were traumatic and gruelling, their journey through care was far worse.

In order to support the brief summary of the experiences that were described in the original higher degree study, reference will be made to 'A Dynamic Model of a Gypsy and Traveller Child's Journey through Care'. This model has been designed specifically to represent the six key stages that the 10 people who took part in the study described as they made sense of their journey through care. Sharing some conceptual similarity with the Berry's (1999) model of acculturation, it uniquely shows that the key difference between cultural assimilation and cultural consistency for these 10 people was located in their experiential and interpretative encounters within the transcultural placement.

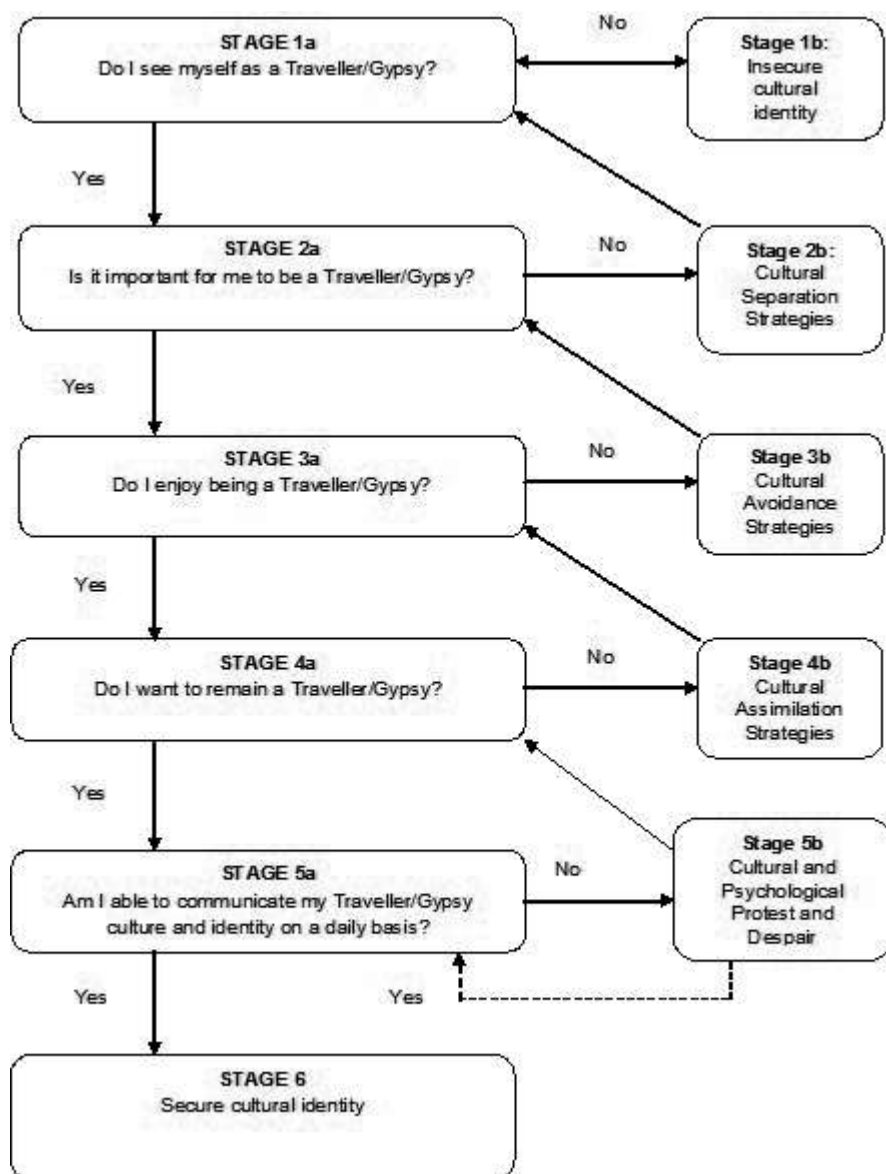


Figure 1: A dynamic model of a child's journey through care

Where cultural assimilation was described, the model symbolises the cyclical struggle that people encountered as they attempted to maintain some sense of cultural identity. It is important to note that those people who recalled the contrasting experience of kinship care in the Republic of Ireland recalled the same six stages, but because their cultural identity was maintained by their Traveller carers, they were able to move more quickly through the six stages than those living in transcultural placements found themselves caught up in.

Seeing the self as a Traveller or Gypsy

Justifying the inclusion of stage 1 of the model, each person explained how their early childhood experiences of being a 'Gypsy' or a 'Traveller' had reinforced their cultural identity, and created an indelible imprint which cemented an understanding of how their cultural identity was unique. Each remembered how they were taught to be separate from, and suspicious of, wider non-Gypsy or Traveller influences:

"Growing up we soon learnt that Giorgio people hated us. They hated us and they hated our culture." (Laura)

Reflecting on these lessons, each person remembered that when they were removed from their families and placed in a transcultural setting, their sense of identity became acute. Instead of feeling safe, each person described the experience of being in a hostile environment which they felt encouraged the need to conceal their Gypsy or Traveller cultural identity so that, as shown in stage 2b, any cultural difference did not make them targets of racism:

"The kids at my new school picked on me because of my [Irish Traveller] accent. I told my foster family, but they didn't care, so I thought, oh well, I won't speak with an accent anymore that way no one will know I am a Traveller. I wanted to make the Traveller me invisible." (Ruth)

The sense of cultural isolation brought about through cultural dislocation led each person to question those principles which composed

their cultural identity whilst engendering a great deal of social and emotional confusion. As a result of these complex dilemmas, each person reported the cultural deprivation and social uncertainty that they encountered as they attempted to search for an object of cultural familiarity that could inspire an investment in permanence. For each person placed in institutionalised care or transcultural settings this object of familiarity did not always exist:

"You weren't allowed any contact with your parents, your family or phone calls or anything. It was hell." (Helen)

Whilst the experience of cultural separation and loss being described may be typical for those children living in transcultural and transracial more generally (Mylène and Ghayda, 2015), it is important to point out that the object which the Gypsies and Travellers who took part in this study were searching for was not. Whilst some children living in care are able to recognise, with some level of familiarity, their own cultural identity (even if this is the more general act of living in a house), Gypsy and Traveller children, particularly those used to living on sites, encampment, or even close knit communities, remain in a space and place characterised by confusion linked to a complete sense of cultural displacement:

"I got back [from school] to the foster house and watched telly. I remember having chewing gum in my hair from the girls at lunchtime, I saw Kylie Minogue on the telly, and I decided that I was going to be like her. I suppose I just wanted to feel normal and I went upstairs [and] cut my hair.... (Laughing) fuckin idiot aren't I. Anyways, it didn't work and [the girls at school] called me all the more. I had made a right job of my hair all sticking up all over the place, but from that day, I decided that I am who I am and that's the way it is. A Traveller through and through (laughing) I found out that I fight good as well. Me Da would have been proud." (Laura)

As Laura explains, transcultural placements compounded the pressure to become culturally assimilated. The effect of this

perceived social pressure became manifest in a behavioural strategy which inspired a need to seek proximity and a feeling of acceptance within the new social context (stages 2b, 3b, and 4b). Yet over time, as Laura articulates, she, like other people who took part in the study, began to feel guilty for abandoning her culture. In order to overcome the feeling of guilt, each person described an obligation to maintain their Gypsy or Traveller identity in any way they could (stages 2, 3 and 4):

"I was a bold [naughty] child. I didn't like them [potential foster carers], I was bold. I wouldn't do as they told me. I had no interest in what they wanted me to do. There were times when I could have [left the institution and] gone to live with a foster family. I met with a lot of families. I remember one family that I could have lived with buying me a large dolls house. All the other children were jealous of me because they said the doll's house was so beautiful and the carers told me that was very lucky to have such a wonderful foster family, but I smashed [the doll's house] up. I smashed it up and no one could understand why. But I know why. I never wanted to live in a house; I never wanted a dolls house, I never wanted to be settled, I never wanted to be like them, the idea of that was alien to me. They were trying to take away my Traveller identity. But they weren't able to. They weren't able to." (Mary)

Summarising the experiences of each person who experienced the threat of cultural assimilation, Mary described how her ideological commitment to a Gypsy or Traveller identity reduced her preparedness to accept cultural change, and increased her resilience to undermine the conventions associated with the new in care experience. For eight other people, the determination to remain a Gypsy or Traveller justified the inclusion of stage 5 in the model. However, because people wanted to communicate their culture on a day to day basis but were unable to, the acculturative distress that this experience caused (stage 5b) became manifest in what they described as aggressive behaviour:

"I didn't do anything that the carers wanted

me to do. I feel bad about it now because I used to give them real trouble. I think that I must have been restrained every day. But I thought that if I did what they said, I would become like them." (Peter)

For three others, self-harm, emotional and social isolation became the common coping mechanism:

"When it all got too much and I started to cut myself and I refused to speak, no one helped me... They didn't know the pain I felt in my heart from not knowing who I was, from being, from being (sobbing) from being treated like animals, worse than animals. No one cared about me as a Traveller." (Mary)

In each example, each person explained that their attempt to maintain and communicate a Gypsy or Traveller identity (stage 5) was labelled with broader racist stereotypes. Instead of responding to this behaviour with empathy, each recalled how their carers attempted to achieve control and enforced cultural assimilation in more extreme and abusive ways. In spite of the challenges presented, people explained that the ability to survive in care whilst experiencing cultural severance, abuse, neglect and displacement was only the beginning of a much longer personal fight to maintain a secure Gypsy and Traveller cultural identity.

The impact of rejection

Despite individual attempts to demonstrate resilience against the threat of cultural assimilation, the six people who took part in the study explained that when they were old enough to leave care, and reintegrate into their Gypsy or Traveller community, they were often marginalised by their own kinship networks as a direct result of living with non-Gypsy/Traveller carers. As they had grown up in care away from their culture and community they were seen to be contaminated by non-Gypsy/Traveller influences. For this reason, some explained that they were unable to marry, and were instead positioned as outsiders to the rest of the community.

"When I left care, I tried to get back in with my family. My Uncle and Auntie took me on

and let me live in their Trailer for a while. When we went to fairs and that, all the boys would all look down at me and call me dirty. They knew that I had been in care and they all thought that I was like a Gorgio girl. That I had been having sex, that I had been to nightclubs and that I had taken drugs. You see, the Gorgio people look at us and see what they think are Gypsies. The same way the Gypsy boys looked at me and saw a Gorgio girl. Because what they have seen on the television, and that, they think that I am dirty, and because of this, no man in his right mind would marry me. If someone did, they would be outcast.” (Ruth)

In contrast to Ruth’s testimony, four other women explained that were able to conceal the fact that they lived in care as children, so as to experience some sense of community inclusion (stage 5). However they also reported that the need to hide the truth about their childhood has been a significant factor in their ability to enjoy and experience positive emotional well-being (stage 5b). Despite surviving a journey through care that was enabled by a firm commitment to an internal ideology of what a Gypsy or Traveller woman should be (stages 1, 2, 3 and 4), they remain as adults alienated and shamed by their own communities because of stereotypical assumptions about the type of people they became whilst living in the public care system. Due to cultural gender expectations, each woman felt that they have never been fully supported to overcome the feelings of complete cultural abandonment and isolation, or the childhood sense of loss and confusion which continues to haunt them to this day:

“In my soul there is a hole that nothing can quite fill.

I’ve searched across the miles, for me time has stood still.

I’m still that convoy member, Travellers across the land.

We have morals and we’re Christian, our loyal moral band.

We believe in freedom, in love and light and hope.

Even though I keep searching, I cannot sit and mope.

I have these precious memories and future happy dreams.

So, one day I hope to find my kin, and then my life begins!” (Josephine)

As this poem shows, feelings of cultural rejection can be particularly evident during adulthood. Here the risk for care leavers is that they grow up to feel that they are not a part of any community because they lack all sense of cultural connection. Interestingly, this poem was shared by a woman who described herself as a ‘Showmen’, an occupational group of people who are not currently recognised as a specific ethnic minority group. However, as Josephine shows, her sense of identity as a ‘Showmen’ far outweighs any legal definition which might be used to validate her own sense of self and culture. Further justifying the inclusion of stage 5b in ‘A dynamic model of a child’s journey through care, this poem shows that where a person’s felt identity is not nurtured, a cyclical pattern of social and psychological protest and despair can be encountered. As the identity and culture of Gypsy and Traveller children living in public care can be neglected, this poem shows how they can be left searching for a sense of belonging well into adulthood. When this driving need or sense of belonging is not fulfilled, Gypsy and Traveller care leavers can be at risk developing an insecure cultural identity which locates them outside of both the dominant society and the Gypsy, Roma and Traveller community. Ultimately this sense of loss leaves people feeling alienated and unwanted by the Gypsy, Roma and Traveller community, thus potentially eradicating their culture (stage 1b) in the same way that Liegeois (1986), McVeigh (1997), Fraser (1995) and Vanderbeck (2005) describe.

A secure cultural identity

Set against the themes that have been described, four people who took part in the project were able to describe positive experiences of living in the public care

system. Without exception, the opportunities to move through the six stages of the model were enabled by the experience of being placed with kinship carers within the Gypsy and Traveller community. The extract taken from a group interview with three sisters below shows that the experience of being fostered within the Gypsy and Traveller community can significantly reduce the prejudices and stereotypes that can be associated with children who lived in care more generally.

"The best thing was that we were sent to live with Traveller carers. I was not worried about making an idiot of myself and because they were Traveller carers we could talk to them and do whatever... (Lisa) Yeah like we didn't have to act different like. We were who we were. Going to a settled [non-Traveller] carer would be hard because they knew nothing about our culture so we would have to tell them about it and they didn't always understand... (Sarah) Yeah, it was like they could look after us properly and we could be who we were. That's good in one sense because they can help you. Settled carers make sure that you're healthy and that fed and the like, but Traveller carers look after the way you feel..." (Emma)

The sense of cultural continuity described here was clearly able to strengthen and nurture a resilient attitude to the experiences of separation and loss which came as a result of being taken into public care. Each person who lived in a kinship placement made constant reference to their cultural identity with a level of clarity, consistency, stability, and confidence in their own sense of being (stage 6). As each described their secure cultural identity, they were also seen to have more consistent self-beliefs, and were less likely to portray a change in their self-descriptions over time. In contrast to the tensions faced by Travellers and Gypsies living in transcultural settings, the association between a secure cultural identity and self-esteem always derived a positive attitude toward the self. Here the act of placing Gypsy and Traveller children with Gypsy and

Traveller foster carers was described by each person as enabling the transition into and out of care to be much safer and much more successful.

Discussion

A summary of the experiences of Gypsies and Travellers who lived in care as children has enabled this paper to reveal how the experience of transcultural care can have long lasting and harmful implications. In addition to the challenges that many minority ethnic children living in the public care system can face (Barn, 2012; 2012), this study has shown that Gypsies and Travellers can experience direct forms of discrimination in placements which do not respect, recognise or support their culture and identity. It also began to problematise the concern regarding state sanctioned assimilation (Liegeois, 1986; McVeigh, 1997; Fraser, 1995; Vanderbeck, 2005) by showing that some people recalled a sense of relief as they were taken into care and only began to resent this action when they encountered hardships associated with acculturative distress.

Reflecting on the testimonies provided, this paper has shown that Gypsies and Travellers living in care are able to demonstrate resilience against certain acculturative pressures including the pressure to assimilate. However, people who lived in transcultural placements as children can experience further cultural isolation and rejection as they stand accused by their own communities of being contaminated by non-Gypsy or Traveller influences, despite taking every possible step to avoid this.

It is in regard to these findings that the ethnographic research by Okley (1983), which incorporated the structuralist notion of cultural identity, developed by Levi-Strauss (1966; 1970) and Douglas (1966), resounds. Okley's (1983) suggestion that a Gypsy, Roma and Traveller cultural identity must be kept separate from, and uncontaminated by, the symbolic representation of non-Gypsy/Traveller influences, is crucial in the argument against the use of transcultural placements. As

explained by those who attempted to maintain a sense of symbolic separation between cultures and ethnic values as children, being a Gypsy or Traveller on a biological basis was not always enough to ensure continued cultural inclusion within Gypsy or Traveller communities. For this reason it is now clear that whether government departments intended to 'eradicate Gypsy existence and culture' or not, the use of transcultural placement can certainly increase the risk of acculturative distress and social alienation in adulthood.

Limitations

Before moving on to consider what implications these findings have in practice, it is first important to recognise that the testimonies presented in this paper represent historical experiences of the public care system. They reflect the experiences of people who lived within in the care system between the 1970s and 2000s; they do not include the views of those living in the care system more recently. Whilst significant changes have been made to the foster care system in the last few decades, it is also important to understand that the experiences being described here are consistent with more current concerns (Brunnberg and Visser-Schuurman, 2015; Schmidt and Baily, 2014). Therefore to suggest that the testimonies included in this study are not representative of contemporary practices, serves only to place over optimistic faith in the structure and organisational context of modern public care services which continues to fail the majority of children who live within it (Christiansen et al., 2013).

It is also important to recognise here that the study was not able to ascertain the views of Roma people. Despite being included in the original sampling strategy, no Roma came forward between 2008 and 2013 to register their interest in participation. However, by triangulating the findings presented here with research published by Brunnberg and Visser-Schuurman (2015) Eurochild (2010); ERRC (2011); Mulheir & Browne (2007);

Schmidt and Baily, (2014) and UNICEF (2012), it could be argued that the key themes are transferable to this group of children. As there is minimal guidance for foster carers and social care workers working to support Gypsy, Roma and Traveller children, the recommendations presented below will reflect the testimonies provided by those people who lived in the public care system as children and will be written to include Roma children wherever possible.

Recommendations

The findings presented in this study suggest that the most obvious way to reduce the cultural isolation and distress experienced by Gypsy, Roma and Traveller living in the care system is to place them with appropriate kinship carers in their own communities. For this recommendation to be realised, social care agencies must acknowledge oppression and take proactive steps to meaningfully engage with Gypsy, Roma and Traveller communities, both collectively and individually. Here, fostering and adoption services should also consider specific efforts to recruit foster carers and adopters from Gypsy, Roma and Traveller communities, either through consortium working or individually (if they have sufficient demand or reason to justify this). However, even though this recommendation reflects an ideology for best practice, it is clear that this proposal, including the wider development of projects like the Shared Rearing Service in the Republic of Ireland (O'Higgins 1993), is not going to be developed by government organisations in the foreseeable future. Whilst domestic populism continues to portray Gypsy, Roma and Traveller cultures as the primary objects of concern throughout Europe (Steward, 2012), the disproportionate representation of these children and the continued use of transcultural placements may be inevitable.

Arguably, the more realistic opportunity for service improvement is for independent fostering providers and voluntary adoption agencies to consider the feasibility of setting

up specialist services to recruit assess and approve foster carers and adopters from the Gypsy, Roma and Traveller communities. The problem with this recommendation is that any service of this type is likely to take time to develop and will only be able to operate in limited jurisdictions. In order to respond to the specific needs of these children in the immediacy, therefore, it is essential that social workers, foster carers and all others actively involved in the day to day care of Gypsy, Roma and Traveller children are able to value the importance of anti-discriminatory practice and cultural competence.

Consistent with the advice of Jackson and Samuels (2011), the culturally competent approach to the support of Gypsy, Roma and Traveller children must be affirmed as a minimum requirement for any effective care planning. This must involve direct involvement in the milieu of the birth culture. To reverse the effects of cultural isolation, emotional abuse and neglect, this requires further development and refinement of that understanding, including opportunities for Gypsy, Roma and Traveller children living in care to experience pride in their own cultural identity. When these things are not provided, the allegations listed at the outset of this paper could be substantiated within the pretext that the public care system can produce the conditions needed to achieve cultural assimilation on an individual basis. Culturally competent care planning for Gypsy, Roma and Traveller children must be about aiming to maximise cultural continuity. This means that, wherever possible, kinship networks, schools and friendships should be maintained, as should contact with family members and the child's wider community where this is appropriate. Not only is this essential in terms of reducing the risks associated with long-term emotional distress, it also reflects the need to ensure that children understand that although they cannot live with their birth family, this does not imply a criticism of the wider Gypsy, Roma and Traveller community of which they are a part: *"You have to accept who people are and*

where they come from. You can't try and change people it is wrong." (Ruth)

This brief testimony shows why it is also important to ensure that transcultural carers are able to reverse the effects of acculturation by learning about the child's culture. Any failure to respect the child's culture and kinship networks will have an adverse impact on their global development. As shown in this study, if the increasing numbers of Gypsy, Roma and Traveller children living in care do not feel that they belong within their transcultural placement, they will most likely reject it, and the carers who are looking after them.

Culturally competent practice should also aim to ensure that children develop the skills required to function across and within both the transcultural setting and the Gypsy, Roma or Traveller community:

"When I was around other Travellers. I knew I was different. I had the smell of the institution on me. I was losing my accent. I wasn't allowed to wear Traveller clothes anymore and that I was losing my Traveller culture and identity... You didn't understand when you went home. You didn't know your family. You had to relearn the Traveller culture. I was bringing home certain settled values and then was making a fool of myself in front of my family." (Mary)

As shown here, the need to prepare people for transition out of public care is essential. Gypsy and Traveller women in particular will be required to cope with and overcome the rather unique social challenges associated with the fact that they were brought up by non-Gypsy/Traveller carers. This preparation is essential if child wishes to integrate more independently into their own community as an adult.

At all times it is important that multicultural planning is embedded in the praxis of culturally competent care and not carried out in a way which could be construed as tokenistic. Incorporating the advice given by the Ross-Ryaner (2008) there are clearly several techniques which can be employed by foster carers and social care workers

when working to promote a positive Gypsy, Roma and Traveller identity. Some of these techniques are included in Table 2.

- Interacting and participating with Gypsy, Roma and Traveller culture, community events such as horse shows and sales, storytelling events, films, and plays that are written by, and include Gypsy, Roma and Traveller talents
- Providing a talking day, or evening, which enables the child to talk about their own families, cultures, lived experiences, hopes dreams and aspirations
- Promoting positive Gypsy, Roma and Traveller role models such as sports people, artists, actors, community leaders. Finding out who they are and showing a keen interest in them
- Showing pictures and articles that reflect a positive view of Gypsy, Roma and Traveller and discussing these with the children
- Maintaining a life story book which includes family photos, records of achievement, holiday memorabilia, letters and any other items which could be used to provide the child with a recordable memory of their life
- Putting up posters of Gypsy, Roma and Traveller of art around the house
- Accessing Gypsy, Roma and Traveller learning materials, including storybooks and websites
- Listening to Gypsy, Roma and Traveller music
- Watching documentaries about Gypsy, Roma and Traveller cultures and talking to the child about the accuracy of them
- Encouraging schools to commemorate the International Holocaust Remembrance Day and other important events
- Liaising with community representatives to organise opportunities to visit community members to learn about Gypsy, Roma and Traveller cultures
- Facilitate Gypsy, Roma and Traveller art and craft projects such as making paperflowers, flags, music and jewellery.

Table 2: Advice for foster carers and social workers planning multicultural care plans and placements

The techniques needed to promote a positive Gypsy, Roma and Traveller identity will be of most value where they take place in an environment where carers help the child make their own meanings about their heritage, and are sensitive about not ‘imposing’ a culture onto a child. A culturally competent carer should be able to reflect with the child about the main differences between a Gypsy, Roma and Traveller and majority community culture, and about what this means to the child in their care.

The final recommendations to be advanced here is for the commissioning of further research which can examine the social care needs of Gypsy, Roma and Traveller children

and families, and the public care experiences

of this group of children using a much wider methodology. This research should also provide government organisations with solid evidence to enable them to develop a specific local policy, setting out how they will meet the needs of Gypsy, Roma and Traveller children and families in their area.

In order to establish a fuller understanding of the over-representation of Gypsy, Roma and Traveller children living in public care in Europe, EU Member States must begin to disaggregate the ethnicity of children living in public care. Unless this is achieved, any knowledge of the number of kinship carers who might be needed to look after Gypsy, Roma and Traveller children will be lost to the homogenisation of diversity. The

clear caveat, here, reflects the continued oppression of Gypsy, Roma and Traveller people throughout Europe (Stewart, 2012) and their reported reluctance to engage in state sponsored censuses (Traveller Movement, 2013). It is essential, therefore, that any disaggregation of ethnicity ensures a high level of transparency. In all cases, Gypsy, Roma and Traveller people must be assured by government and non-government organisations that this data is only being sought to improve their situation, rather than to disadvantage them or oppress them in any way.

Conclusion

The testaments included in this paper hold out the hope for a developed understanding of some of the unique challenges that Gypsy and Traveller children living in the public care system can face. Most crucially, this paper has shown that whilst social care intervention can be described as a welcomed form of protection against the experiences of abuse and neglect, culturally incompetent practices and insensitive care planning decisions can amplify feelings of rejection and acculturative distress. By highlighting the experiences of those people who were raised in transcultural placements as children, this paper has been able to show, therefore, that whilst the pre-care experiences of some people was traumatic or gruelling, the subsequent journey through the public care system was far worse.

While this paper has suggested that effective care planning for Gypsy, Roma and Traveller children might only be achieved through kinship care arrangements, it has also indicated that where this is not possible, there remains an urgent need for professionals to spend time with the child to listen and talk to them, as any reasonable parent should. In all cases, this requires a shift in emphasis which sees Gypsies, Roma and Travellers less as objects of concern, and more as culturally proud and resilient children, who might be

losing their identity, their sense of cultural pride, their customs, and their distinct way of life. As shown by research contained in this paper, paying (more) respectful attention to the heritage and lived experience of these children in the future is one important way to reduce the devastating impact of unwitting decisions that could eradicate Gypsy existence and culture.

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